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.	77707								
8	BEFORE THE BOARD OF REGISTERED NURSING								
9	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA								
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11	In the Matter of the Accusation Against:	Case No. 2011- 830							
12	LISA ANN ANCICH, AKA LISA ANN	ACCUSATION							
13	ANCICH-PERKOV, AKA LISA ANN PERKOV								
14	325 N. Malgren Avenue San Pedro, CA 90732								
15									
16	Registered Nurse License No. 382569								
17	Respondent.								
18	Complainant alleges:	.							
19	PARTIES								
20	1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her								
21	official capacity as the Executive Officer of the Board of Registered Nursing, Department of								
22	Consumer Affairs.								
23									
24									
25	Perkov (Respondent). The Registered Nurse License was in full force and effect at all times								
 26	relevant to the charges brought herein and will expire on November 30, 2012, unless renewed.								
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Accusation

JURISDICTION

3. This Accusation is brought before the Board of Registered Nursing (Board),
Department of Consumer Affairs, under the authority of the following laws. All section
references are to the Business and Professions Code unless otherwise indicated.

STATUTORY PROVISIONS

- 4. Section 2750 provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.
- 5. Section 2764 provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license. Under section 2811(b) of the Code, the Board may renew an expired license at any time within eight years after the expiration.
 - 6. Section 2761 states, in pertinent part:

"The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

- "(a) Unprofessional conduct, which includes, but is not limited to, the following:
- 7. Section 2762 states, in pertinent part:

"In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

- "(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.
- "(1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions."

(Made Grossly Incorrect, Grossly Inconsistent, or Unintelligible Entries in Medical Records)

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12. Respondent's license is subject to disciplinary action under Code section 2761, subdivisions (a) and (d), on the grounds of unprofessional conduct, as defined under Code section 2762, subdivision (e), in that while employed as a registered nurse at Saint Mary Medical Center (SMMC) in Long Beach, California, Respondent falsified, made grossly incorrect, grossly inconsistent, or unintelligible entries in hospital and patient records pertaining to dangerous drugs

FIRST CAUSE FOR DISCIPLINE

Patient ID No. 3

in the following respects:

a. On or about January 30, 2008, at 18:55 and 19:49 hours, Respondent removed Nalbuphine (Nubain) (10mg on each occasion, with the second 10mg amount dispensed at 19:49 hours reported by Respondent as having been wasted) from the Pyxis for Patient ID No. 3. Respondent failed to chart the administration of Nubain in the patient's Medical Administration Record (MAR) as required, and failed to document the administration thereof in the applicable 24-Hour Flow sheet, as required. Respondent, who was not assigned to care for this patient, obtained a verbal order for Nubain, but failed to have the physician co-sign the order, as required. Respondent also failed to indicate who witnessed the wastage or otherwise account for the Nubain 10mg that was dispensed at 19:49 hours and thereafter reportedly wasted, as required. The physician's orders were for Nubain 5MG IM O3 PRN.

Patient ID No.8

b. On or about March 27, 2008, at 19:38 and 19:39 hours, Respondent removed Nubain (10mg on each occasion, with the second 10mg amount dispensed at 19:39 hours reported by Respondent as having been wasted) from the Pyxis for Patient ID No. 8. At 20:00 hours, Respondent documented that she had administered 5mg of Nubain to Patient ID No. 8 in the patient's Medical Administration Record (MAR), but failed to to indicate who witnessed the

wastage or otherwise account for the remaining Nubain 5mg that was dispensed at 19:38, and Nubain 10mg that was dispensed at 19:39 hours and thereafter reportedly wasted, as required. The physician's orders were for Nubain 5MG IM Q3 PRN Post Op.

Patient ID No. 10

c. On or about April 3, 2008, at 18:58 hours, Respondent removed 10 mg

Nalbuphine (Nubain) from the Pyxis for Patient ID No. 10. Respondent charted
the administration of this Nubain in the patient's Medical Administration Record
(MAR), but failed to document the administration thereof in the applicable 24Hour Flow sheet, as required, and failed to have the physician co-sign the order,
as required. The physician's orders were for Nubain 10MG IVP for itching.

Patient ID No. 14

d. On or about April 12, 2008, at 19:35 and 23:12 hours, and then subsequently again on or about April 13, 2008, at 03:09 hours, Respondent removed Nubain (10mg IM and 10mg IVP/20mg total on each of the three occasions) from the Pyxis for Patient ID No. 14. Respondent charted the administration of this Nubain in the patient's Medical Administration Record (MAR), but her recorded entries in Patient ID No. 14's MAR on April 13, 2010 as to the time such medication was administered to this patient on that date were unintelligible, and on all three occasions, Respondent failed to document the administration of such medication to Patient ID No. 14 in the applicable 24-Hour Flow sheet, as required. The physician's orders were for Nubain 10MG IVP Q3 PRN for pain.

Patient ID No. 16

on or about April 13, 2008, at 21:10 hours, Respondent removed 10mg Nubain from the Pyxis for Patient ID No. 16, 5mg of which was reportedly wasted.

Respondent failed to chart the administration of this Nubain in Patient ID No. 16's MAR, and failed to document the administration of such medication in the applicable 24-Hour Flow sheet, as required. As such, Respondent further failed

to account for the remaining Nubain 5mg that was reportedly wasted, and failed 1 to indicate who witnessed the wastage, as required. The physician's orders were 2 for Nubain 5MG IM Q3 PRN Post Op. 3 SECOND CAUSE FOR DISCIPLINE 4 (Obtain or Possess Dangerous Drugs in Violation of Law) 5 Respondent's license is subject to disciplinary action under Code section 2761, 13. 6 subdivision (a), on the grounds of unprofessional conduct, as defined in Code section 2762, 7 8 subdivision (a), in that while employed as a registered nurse at SMMC, Respondent obtained or possessed dangerous drugs in violation of law. Complainant refers to, and by this reference 9 incorporates the allegations in paragraph 12, as though set forth fully. 10 THIRD CAUSE FOR DISCIPLINE 11 (Unprofessional Conduct – Gross Negligence) 12 Respondent's license is subject to disciplinary action under Code section 2761, 14. 13 subdivision (a), on the grounds of unprofessional conduct, as defined in Code section 2762, 14 subdivision (a)(1), in conjunction with California Code of Regulations, title 16, section 1442, in 15 that while employed as a registered nurse at SMMC, Respondent committed gross negligence by 16 repeatedly making grossly incorrect, grossly inconsistent, or unintelligible entries in hospital and 17 patient records, and by repeatedly obtaining dangerous drugs in violation of law. Complainant 18 refers to, and by this reference incorporates the allegations in paragraph 12, as though set forth 19 fully. 20 **PRAYER** 21 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, 22 and that following the hearing, the Board of Registered Nursing issue a decision: 23 Revoking or suspending Registered Nurse License Number 382569, issued to 1. 24 Respondent Lisa Ann Ancich, aka Lisa Ann Ancich-Perkov, aka Lisa Ann Perkov; 25 TII26 111 27 28 ///

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	2. Ordering Respondent Lisa Ann Ancich, aka Lisa Ann Ancich-Perkov, aka Lisa Ann Perkov to pay the Board of Registered Nursing the reasonable costs of the investigation and									
2		and								
3	enforcement of this case, pursuant to Business and Professions Code section 125.3;									
4	3. Taking such other and further action as deemed necessary and proper.									
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6	DATED:		LOUISE R.	BAILEY, I	M.ED., RN	ly_				
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